THE TRUTH ABOUT ACES

WHAT ARE THEY?

ACES are ADVERSE CHILDHOOD EXPERIENCES

HOW PREVALENT ARE ACES?
The ACE study* revealed the following estimates:

**ABUSE**
- Physical Abuse: 26.3%
- Sexual Abuse: 20.7%
- Emotional Abuse: 10.96%

**NEGLECT**
- Emotional Neglect: 14.98%
- Physical Neglect: 9.9%

**HOUSEHOLD DYSFUNCTION**
- Household/Substance Abuse: 26.9%
- Perinatal Violence: 23.3%
- Household/Mental Illness: 19.4%
- Mother Treated Violently: 12.7%
- Incarcerated Household Member: 4.7%

The three types of ACES include:

- ABUSE: Physical, Emotional, Sexual
- NEGLECT: Physical, Emotional
- HOUSEHOLD DYSFUNCTION: Mental Illness, Incarcerated Relation

WHAT IMPACT DO ACES HAVE?
As the number of ACES increases, so does the risk for negative health outcomes.

RISK

Possible Risk Outcomes:

- Lack of physical activity
- Smoking
- Suicide
- Drug use
- Work-related injury

PHYSICAL & MENTAL HEALTH
- Severe obesity
- Diabetes
- Depression
- Suicide attempts
- STDs
- Heart disease
- Cancer
- Stroke
- COPD
- Diabetes

OF 17,000 ACE study participants:
- 276 have 1 ACE
- 51% have at least 1 ACE
- 30% have experienced 3+ ACES
- 64% have at least 3+ ACES

rwjf.org/aces

*Source: http://www.cdc.gov/HealthyChildren/aces.htm
Adverse Childhood Experiences (ACEs) Screening – Medical Settings

This questionnaire is completely anonymous, and your answers will not be shared with anyone. We want to use this information to improve our Treatment services.

The Center for Disease Control’s Adverse Childhood Experience (ACEs) Study has identified 10 kinds of traumatic events that often occur in families that are “stressed out” by things like substance abuse, extreme poverty, mental illness, being homeless, or being moved around all the time. Having things like this happen in childhood can have a lasting effect on your physical and mental health. Take a look at the categories below. Exposure to one type (not incident) of ACE, qualifies as one point. An ACE Score of 0 (zero) indicates no exposure, while an ACE score of 10 indicates exposure to all trauma categories.

INSTRUCTIONS: 1) Identify and list a few of your strengths – how did you survive? Some things about you that you really like? 2) Read the ACE definitions and identify anything you experienced in the family (or families) you grew up in BEFORE THE AGE OF 12. Then enter your answer (yes/no) for each type of trauma. Add your “yes” scores to get your Trauma Dose. 3) Complete the NOW column. 4) Then complete the HOW questions. You’re encouraged to discuss your answers with a Counselor or Therapist.

1. STRENGTHS:

How old are you now? (Please circle) 6 – 12 13 – 18 19 – 25 26 – 35 36 – 45 46 – 55 56 – 65 66 +

<table>
<thead>
<tr>
<th>2. ACEs</th>
<th>Did this ever happen to you as a child before you were 12 years old?</th>
<th>NO</th>
<th>YES</th>
<th>3. NOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Abuse</td>
<td>Did a parent or other adult in the household often or very often, swear at you, insult you, put you down and/or threaten you in a way that made you think you might be physically hurt?</td>
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<td>Physical Abuse</td>
<td>Did a parent or other adult in the household often or very often...push, grab, slap, or throw something at you? Or ever hit you so hard that you had marks or were injured?</td>
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<td>Sexual Abuse</td>
<td>Did an adult or person at least 5 years older ever touch or fondle or have you touch their body in a sexual way? Did anyone attempt or actually have oral, anal, or vaginal intercourse with you?</td>
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<tr>
<td>Emotional Neglect</td>
<td>Did you often or very often feel that no one in your family loved you or thought you were important or special? Or your family didn’t look out for each other, feel close to each other, or support each other?</td>
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<td>Physical Neglect</td>
<td>Did you often or very often feel that you didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you? Or your parents were too drunk or high to take care of you or take you to the doctor if you needed it?</td>
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<tr>
<td>Mother Treated Violently</td>
<td>Was your mother or stepmother often, or very often pushed, grabbed, slapped, or had something thrown at her? Sometimes, often, or very often kicked, bitten, hit with a fist or something hard? Ever threatened or hurt by a knife or gun or other weapon?</td>
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<tr>
<td>Household Substance Abuse</td>
<td>As a child, did you ever live with anyone who was a problem drinker or alcoholic or lived with anyone who used street drugs?</td>
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<tr>
<td>Household Mental Illness</td>
<td>Was a household member ever depressed; mentally ill or sent to a mental hospital? Has a family member ever attempted suicide?</td>
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<tr>
<td>Parental Separation/Divorce</td>
<td>As a child, were your parents ever separated (didn’t live together) or divorced?</td>
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<tr>
<td>Incarcerated Household Member</td>
<td>Did a household member ever go to prison, or was constantly in and out of jail?</td>
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</table>

TOTAL ACE SCORE = Add all
TOTAL “trauma load” =

3. NOW: Across each YES row that you marked, how often does this experience of childhood trauma bother you in your life today?

1 – Never or almost never 2 – Hardly Ever 3 – Some of the time 4 – Most of the time 5 – Always or almost always

4. HOW: How has this trauma affected your life? Have you developed a chronic medical condition, such as: ☐ diabetes? ☐ out-of-control blood pressure? ☐ chronic obstructive pulmonary disease (COPD)? ☐ substance abuse or addiction? ☐ serious mental health problems? ☐ heart attack or stroke? ☐ Chronic pain? ☐ Autoimmune disorders like Lupus? ☐ fibromyalgia? ☐ serious depression? ☐ chronic anxiety or PTSD?

Thank you for your courage and honesty in sharing your experience...if this is still troubling you, please ask for help!

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Resource Tapping – an EMDR-related Intervention for Physical Healing
[based on the work of Ronald Siegel PhD on chronic pain and Laurel Parnell PhD on EMDR]
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Figure 1 – mindfulness, imagery & relaxation

The use of “resource tapping” in chronic medical conditions is predicated on the hypothesis that: (1) medical challenges are multi-dimensional - mental and emotional as well as physical; (2) medical interventions may leave the mental/emotional dimensions unresolved; and (3) that the mindful integration of intention, visualization and breathwork coupled with bilateral stimulation of the brain hemispheres may enhance the effectiveness of medical interventions.

Mindfulness brings the cerebral cortex (awareness & intention), the limbic system (visualization & somatic imagery) and the brainstem (breathing and relaxation) to a conscious focus on healing, while bilateral stimulation (“tapping” or auditory) integrates the brain hemispheres with physical sensation.

The visualization/imagery aspect might bring the focus on a “peaceful place”, a “nurturing figure” or a “felt sense of wholeness/healing” to bear on the affected body part(s).

These techniques can be taught in clinic, and then made part of the patient’s home care between appointments. This helps to engage the patient actively in their own healing journey. The aim is to help the patient reclaim their power, and identify with the process of healing, rather than of illness or injury.
Tapping in Health to an Unhealthy or Injured Part of Your Body*

(1) Bring your attention to the part of your body that is unhealthy or injured. Notice what it feels like. Is there a color, shape or temperature associated with it?

(2) Now bring your awareness to a part of your body that feels healthy. Notice what it feels like. Is there a color, shape or temperature associated with it?

(3) If you can’t locate a healthy feeling in your body, recall a time when your body WAS healthy. What were you doing then? What did it feel like?

(4) When you have a strong sense of the healthiness, TAP right-left, right-left 6 to 12 times. If the good feeling is getting stronger and feels positive, you may tap longer if you wish.

(5) Now invite the healthy image, sensation or temperature to transfer over to the unhealthy part of your body. You can imagine the healthy part transposing onto the unhealthy part, mixing with it, or infusing it with vibrancy. You can use an image such as “white light” to represent the feeling of health and allow it to fill the unhealthy part. As you imagine this TAP 6 – 12 times, or as long as it continues to feel positive.

(6) You can go back and forth between the healthy and unhealthy parts repeating the steps as often as you like.

(7) Now imagine yourself healthy and whole in the future. TAP as you imagine this.

There can no longer be any doubt that our health is deeply impacted by our thoughts and feelings. Guided imagery alone has been shown to aid in healing and speed recovery time. Because Resource Tapping is such an effective way to harness the power of imagination, it can be especially potent when applied to health issues. Here are a few more ways to utilize Resource Tapping for health.

1. You can “tap in” memories of times you healed in the past. For example, if you had an injury and got better, TAP the memory of how you healed. Remember that your body knows how to heal itself. If you had an illness, remember that you got better.

2. To inspire hope, you can “tap in” the image of someone you know (or have heard about) who recovered from a similar illness or injury. Bring up an image or memory that represents this person’s healing and TAP.

3. You can “tap in” healing imagery. What images do you associate with healing? What image would help your body to heal? What does your body need? As you imagine it, TAP. One woman who received chemotherapy for her cancer treatment felt her body had been “poisoned.” She imagined herself underneath a beautiful waterfall, the cleansing water purifying the toxins from her body. As she imagined this, she tapped on her knees.

4. Imagine yourself healthy and whole. TAP as you imagine this. Remind your body that it can heal itself.

QUICK TAPPING SEQUENCE FOR PHYSICAL PAIN

#1) **FOCUS** on your most intense **PAIN**.

#2) **TAP 50 TIMES** on the back of one hand between the little (baby) finger knuckle and the ring finger knuckle.

#3) **TAP 5 TIMES** on both collarbone points.

Repeat until pain is gone! www.tapawaypain.com/blog

Here’s the simple steps Callahan developed for physical pain.

1) **Focus on your pain**. Intentionally think about the physical symptoms, location, and how intense the pain is right now as you are experiencing it. Rate the intensity on the 0-10 scale, with 10 being the most intense pain you can imagine possible.

2) **Stay focused in the pain, and tap 50 times on the Gamut Point** on the back of one hand, using two fingers of the opposite hand.

3) **Tap 5 times on both collarbone points** while keeping your mind focused on the physical pain.

That’s it!

Now you want to re-rate the physical symptoms you were focused on in Step #1.

**HAS YOUR 0-10 RATING CHANGED?**
Here's how to follow-up on your progress for total relief depending on your new 0-10 rating.

**THE KARATE CHOP POINT**

SUPERCHARGE TIP: Tap the Karate Chop Points of both hands TOGETHER!

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**If there is no change,** or your rating only dropped a point or two, you’ll want to **correct for energy reversals** that might be impeding the tapping progress.

Here you’ll use the “Karate Chop” points on the side of the hands under the baby (little) finger. These are the spots you would hit doing a karate chop on the edge of a table.

You can either tap on the Karate Chop point of one hand with two fingers of the opposite hand, or you can supercharge your results by tapping both Karate Chop points together.

Focus again on the pain and tap on the Karate Chop point while saying aloud, **“Even though I still have this pain, I accept myself and my body and I allow my body, in its infinite wisdom, to heal and release whatever is causing this pain quickly, easily, and in a healthy manner.”**

Then repeat the **QUICK TAPPING SEQUENCE FOR PHYSICAL PAIN.**
“Living Past my Pain” Worksheet for: [my name]

OK – now that you’re willing to stop trying to CONTROL your pain, what’s a behavior change that will support your Recovery? Try to think of something small and do-able in the next week:

Precontemplation
What is “the problem?” What is the problem REALLY? (Hint – it’s NOT the pain!)

Contemplation
Figuring it out – what is pain? What is ACT, and how can it help? Is trying to “control” my pain the answer? If not, what can I try instead?

How am I going to cement my change into a HABIT?

Maintenance

Preparation
What do I value? What makes me “me” – besides my pain?

How’s my fall-back plan if I’m not successful right away?

OK – enough with the planning already. When am I gonna DO it? Pick a date:

Action
Who am I going to tell, so I can’t back down?

How can I reframe my experience of pain?

Michael G. Bricker 2014 (used by permission)